PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docke: Number

		L									
1		ODAINIS,		FILED - PART I (Column 1) (Column 2)				ENTITY		OTHE	R THAN
TOTAL CLAIMS			1000	(COOMIT)		lumn 2)	TYPE			SMAL	L ENTITY
FOR							RATE	FEE	_	RATE	FEE
			NUMBE	NUMBER FILED		IBER EXTRA	BASIC F	EE	OF	BASIC FE	E 950
TOTAL CHARGEABLE CLAIMS			19 1	ninus 20=	•		XS 9	:	OR	X\$18=	772
INDEPENDENT CLAIMS			3 minus 3 = *				X43=		OR	X86=	1
L	ULTIPLE DEPE	NDENT CLAIM I	PRESENT				+145=	<u> </u>			
• If the difference in column 1 is less than zero, enter "0" in column :						column 2	TOTAL		OR	L	1125
CLAIMS AS AMENDED - PART II							TOTAL	·	OR		1950
		(Column 1)		(Column 2) (Column 3			SMALI	- ENTITY	OR		THAN ENTITY
A		CLAIMS		HIGHE	ST				7		·,
AMENDMENT,		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	XS 9=		OR	XS18=	
AM	Independent	ENTATION OF M	Minus	PENDENT.	CL A/A	= (=)	X43= -		OR	X86=	
			· ·	PENDENT	CLAIM		+145=		OR	+290=	
							TOTAL		اا	TOTAL	
(Column 1) (Column 2) (Column 3)								: L	JOR ,	ADDIT. FEE	L
		CLAIMS		(Colum HIGHÉ		(Column 3)					
T 8		REMAINING	1	NUMB	ĒR	PRESENT		ADDI-	1 [ADDI-
EN		AFTER AMENDMENT		PREVIOL PAID F		EXTRA	RATE	TIONAL FEE		RATE	TIONAL
AMENDMENT	Total	*	Minus	••		= :	XS 9=	1 66	OR	X\$18=	FEE
ME	Incependent	•	Minus	ATTE		=	V40	 	┨┷┸┠		
	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X43=		OR	X86=	
				•			+145=		OR.	+290=	
							. TOTAL ADDIT. FEE		OR	TOTAL DDIT FEE	
		(Column 1)		(Column	12)	(Column 3)					
ပ		CLAIMS REMAINING		HIGHES NUMBE				ADĎI-		···	4001
١		AFTER		PREVIOU		PRESENT EXTRA	RATE	TIONAL		RATE	ADDI- TIONAL
ᄬ		AMENDMENT		PAID FC	PR	D.M.A.		FEE		1001	FEE
Z	Total		Minus	**		=	X\$ 9=		OR	X\$18=	
Ž	Independent		Minus	***		Ξ '	V42		-		
<u> </u>	FIRST PRESE	NTATION OF MULTIPLE DEPENDENT CLAIM					X43=		OR	X86=	
the entry in column 1 is less than the entry is column 2 with the entry is									OR	+290=	
•••										TOTAL	
		nber Previously Pai ber Previously Paid	U POLINI I MIN	C CDACE :- 1.		0		or,opriate box	OR AL	ODIT. FEE L nn 1.	